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STATE OF MONTANA BULLETIN

OF THE

Department of Public Health

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June 15, 1915

No. 2

MONTANA STATE BOARD OF HEALTH.

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HELENA, MONTANA.

Published Monthly at Helena, by the State Board of Health.

"The science of disease prevention, if properly applied, can add fifteen years to the present average length of human life."—Prof. Irving Fisher, Yale.

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BETTER RURAL SCHOOLS.

By C. W. Tenney, Inspector of Rural Schools.

State, county and city health officers have done much the past two years to promote the campaign that has been and is being waged for the betterment of Montana schools. Every convention that has been held during the past two years has given school work an important place upon the program, while individually these guardians of the public health have prepared papers on medical inspection, contagious diseases, etc., and, without compensation, have taken their places on the programs of teachers' institutes, association meetings and other gatherings. Neither has the good work stopped with these public gatherings, for the reports of the county superintendents show that the progressive health officer is always willing to cooperate by visiting the schools, addressing the pupils and urging the respective communities to "swat the fly", clean the buildings, provide separate privies or sanitary toilets, etc. Though many things have been included, the best and most constant work has been done in connection with ventilation, lighting, and drinking water.

Ventilating Stove or Furnace

From first to last it has been urged that pupils should be supplied with fresh air. Some patrons have tried to dodge the issue by insisting that a window device would do, but a firm stand on the statement that the ventilating device must remove the foul air as well as let the fresh air in has brought results, so that Montana today can boast of over four hundred schools that are properly equipped with furnaces or jacketed stoves.

Light from Left and Rear.

Last year one of the newspapers ran an article telling how the trustees of a certain district in Pennsylvania purchased glasses for a large number of its pupils. On glancing at the first paragraph, the average reader was inclined to say: "What generous men!", but the next paragraph spoiled it all by stating that a proper arrangement of the lighting systems in the homes and schools of these pupils would have saved many of them from the necessity of using

glasses, and made the case look different. The same thing is true in Montana. Some trustees and some patrons, not knowing that light coming from the right as it does in so many of the old type of school buildings, compelled their boys and girls to be tantalized by the omnipresent shadow of their right hands, were inclined to criticize and even resent what seemed to them to be interference. In some places men even went so far as to report buildings costing \$600 at \$499 and paid the difference out of their own pockets so they would not have to submit their plans to the State Board of Health. However, just as soon as they learned that Doctor Cogswell and his efficient co-workers were simply striving to make the schools more efficient and to save the eyesight of their boys and girls, there was a complete change of attitude in this respect and now the trustees and superintendents are anxious to receive any and all suggestions that will suit their local needs.

Sanitary Cups and Towels.

The same was true in regard to drinking water and contagious diseases. "Pretty nice!" or "let the kids have the measles!" was the explanation offered but as soon as the people learned that the schools were being closed and that boys and girls were losing their lives on account of the measles, they began to look at the question in a more serious way. Still some contended that the rural schools had nothing to fear from a typhoid epidemic, until the state chemist answered the question by stating that the largest percentage of cases started in the small places and not in the city. Another good example came from one of the rural schools in Montana. One day a little girl came to school with a sore on her face. All used the pump and the common drinking cup, so it was but a short time until every child in school was affected with the loathsome disease. Needless to say, the mothers of that district needed no further argument concerning the value of sanitary towells, a covered water cooler and individual drinking cups.

Cleanliness Next to Godliness.

While all of the districts cannot have fine, large and new buildings, there is no excuse whatever for not keeping the building they do have clean and neat. In the larger places a

janitor should be employed, who should be instructed from the very start that when it comes to a question of dirt in a school building, there should be absolutely no neutral ground. The janitor who cannot see the corners or who forgets the parts of the building not actually used for class rooms should have no place in a school building, for besides endangering the health of the boys and girls and disgracing the community, he is actually doing more to educate the boys and girls in the wrong way than the teachers can do in the right way. Take for example a girl. Let her stay for twelve years in a room that is dirty and slovenly kept and when she becomes a woman in a Montana home, her kitchen and even her parlor will look somewhat like the school room that she unconsciously learned to think of as good enough. Or take a boy who stays in a yard that is filled with trash and rubbish for most of the days during the formative period of his life and you will find that he will develop into a seedy, run-down farmer or business man. In the schools too small to hire a janitor, the boys and girls should cooperate with the teacher and everyone should remember that a little claim shack that is clean and well kept, where both teachers and pupils are working together in a way that creates a right school and community atmosphere, will furnish a better training for Montana boys and girls than any building that is slovenly kept and has teachers who are satisfied with what they are and have and who have no desire or ambition to make the school or community better because of their presence.

In Search of His Home

Rudely awakened from sleep, at about 2:30 A. M., by his doorbell, the peaceable resident stuck his head out of the window and in no very pleasant manner demanded to know what was wanted.

"Scuse me, sir," answered a muddled voice. "Does Jones live here?"

"Jones? Of course not. What the devil do you mean by ringing people's bells at this time of morning? Who are you, anyway?"

"Who'm I?" asked the disturber, apparently surprised. "Why, I'm Jones!"

Try to Be the Fellow That Your Mother Thinks You Are.

While walking down a crowded city street the other day
I heard a little urchin to a comrade turn and say:

“Say Jimmie, let me tell yer, I’d be as happy as a clam
If I only was de feller dat me mudder t’inks I am.

“She t’inks I am a wonder and knows her little lad
Would never mix wit’ nottin’ dat was ugly, mean or bad;
An’ lots o’ times I sit and t’ink how nice ’twould be —gee
whizz,

If a feller was de feller dat his mudder t’inks he is.”

So, folks, be yours a life of toil or undiluted joy,
You can still learn a lesson from the small unlettered boy;
Don’t try to be an earthly saint with eyes fixed on a star—
Just try to be the fellow that your mother thinks you are.

—From “Noodles” Fagen of the Kerr Tribune Company.

Great Demand.

Visitor (at blind asylum)—I thought this institution was
for both sexes, but I see only men here. Have you no
female inmates?

Matron—Oh, yes; but they’ve all been rented out for chap-
erons.

If you have a skeleton in your closet—well, that’s the place
for it.

REFLECTION ON THE PROFESSION

Doctor to assistant— That’s an odd thing I have just done.

Assistant—What is that, Doctor?

Doctor—In signing this death certificate I put my name
where the cause of death should be.—

COMMUNICABLE DISEASES REPORTED TO THE STATE
BOARD OF HEALTH FOR THE MONTH
OF MAY—1915.

Smallpox—Cascade (Excl. of Gt. Falls), 1; Anaconda, 1, Flathead (Excl. of Kalispell), 1; Gallatin (Excl. of Bozeman), 1; Jefferson, 1; Helena, 1; Madison, 2; Livingston, 1; Butte, 9; Toole, 1; Yellowstone (Excl. of Billings), 2; Total, 21.

Total last Month, 26.

Diphtheria—Dawson, 1; Anaconda, 2; Fergus, 1; Livingston 1; Stillwater, 1; Butte, 2. Total, 8. Total last Month, 25.

Scarlet Fever—Blaine, 3; Broadwater, 3; Custer, 1; Anaconda, 1; Fergus, 1; Flathead (Excl. of Kalispell), 8; Hill, 2; Lewis & Clark (Excl. of Helena), 4; Lincoln, 4; Phillips, 7; Richland, 2; Stillwater, 1; Butte, 1; Wibaux, 3; Total, 41.

Total last Month, 37.

Typhoid Fever—Blaine, 6; Cascade (Excl. of Gt. Falls), 3; Gt. Falls, 1; Fergus, 3; Flathead, 2; Hill, 2; Helena, 5; Livingston, 1; Lincoln, 3; Prairie, 2; Butte, 1; Billings, 1;

Total, 30. Total last Month, 30.

Measles—Beaverhead, 1; Broadwater, 2; Gt. Falls, 1; Choteau, 18; Custer, 1; Fergus, 10; Hill, 1; Jefferson, 1; Helena, 1; Lincoln, 1; Mineral, 1; Missoula (Excl. of Missoula City), 2; Missoula City, 14; Prairie, 2; Sheridan, 2; Sweet Grass, 35; Butte, 1; Teton, 3; Toole, 11; Yellowstone (Excl. of Billings) -. Total 109; Total last Month, 108.

Cerebro-Spinal Meningitis—Missoula City, 1; Total 1. Total last Month, 2.

Spotted Fever—Carbon, 1; Custer, 3; Dawson, 2; Fallon, 1; Missoula (Excl. of Missoula City) 2; Missoula City, 1; Richland, 1; Rosebud, 2; Total, 13. Total last Month, 14.

Tuberculosis—Custer, 2; Fergus, 1; Gallatin (Excl. of Bozeman), 1; Bozeman, 1; Missoula, (Excl. of Missoula City), 1; Butte, 8; Yellowstone (Excl. of Billings), 1; Billings, 1. Total, 16. Total last month, 13.

Whooping Cough—Custer, 1; Meagher, 5; Total, 6. Total last Month 29.

Anterior Poliomyelitis—None Reported. Last Month, 2.

Trachoma—Custer, 1; Total 1. Total last Month, 0.

Chickenpox—Flathead (Excl. of Kalispell), 1; Musselshell, 18; Total, 19. Total last Month, 0.

**BIRTHS (EXCL. OF *STILLBIRTHS) REPORTED TO THE STATE BOARD
OF HEALTH FOR THE MONTH OF MAY, 1915, AND COMPARA-
TIVE BIRTH AND DEATH RECORD IN THE STATE.**

	Males.	Females.	Totals.	Deaths.	Excess of Births.	Excess of Deaths.
Beaverhead	5	3	8	8	1	...
Broadwater	5	2	7	4	3	...
Carbon	12	7	19	2	71	...
Cascade Excl. of	8	11	19	10	9	...
Great Falls	17	31	48	21	27	...
Chouteau	10	9	19	8	11	...
Custer	8	9	17	10	7	...
Dawson	12	7	19	7	12	...
Deer Lodge Excl. of	1	..	1	10	..	9
Anaconda	9	2	11	10	1	...
Fergus	26	24	50	17	33	...
Flathead Excl. of	6	6	12	7	5	...
Kalispell	8	10	18	5	13	...
Gallatin Excl. of	12	12	24	7	17	...
Bozeman	7	8	15	5	10	...
Granite	3	1	4	1	3	...
Jefferson	1	3	4	5	1	...
Lewis and Clark Excl. of	4	4	8	6	2	...
Helena	12	14	26	15	11	...
Lincoln	8	5	13	9	4	...
Madison	3	1	4	3	1	...
Meagher	4	7	11	6	5	...
Missoula Excl. of	5	3	8	3	5	...
Missoula City	10	13	23	24	..	1
Musselshell	12	9	21	5	16	...
Park Excl. of	5	8	13	9	4	...
Livingston	7	6	13	2	11	...
Powell	4	6	10	5	5	...
Ravalli	7	3	10	8	2	...
Rosebud	8	9	17	2	15	...
Sanders	2	4	6	7	..	1
Silver Bow Excl. of	11	10	21	21
Butte	39	44	83	62	21	...
Sweet Grass	3	3	6	3	3	...
Teton	9	12	21	9	12	...
Valley	14	10	24	4	20	...
Yellowstone Excl. of	14	12	26	4	22	...
Billings	15	14	29	11	18	...
Big Horn	3	2	5	..	5	...
Blaine	5	2	7	4	3	...
Fallon	3	1	4	3	1	...
Hill	8	17	25	12	13	...
Mineral	2	1	3	2	1	...
Phillips	4	7	11	5	6	...
Prairie	1	2	3	..	3	...
Richland	7	1	8	5	3	...
Sheridan	12	9	21	5	16	...
Stillwater	8	6	14	2	12	...
Toole	3	4	7	4	3	...
Wibaux	3	3	6	1	5	...
Totals	405	397	802	397	472	11

*—Stillbirths 38

**DEATHS (EXCL. OF STILLBIRTHS) REPORTED TO THE STATE BOARD
OF HEALTH FOR THE MONTH OF MAY, 1915, ARRANGED
ACCORDING TO COUNTIES AND PRINCIPAL CITIES.**

	Spotted Fever.....	Small Pox.....	Tuberculosis.....	Diphtheria.....	Scarlet Fever.....	Measles.....	Lymphoid Fever.....	Meningitis.....	Whooping Cough.....	Pneumonia.....	Nephritis.....	Organic Heart Disease.....	Malignant Tumors.....	Acute Intestinal Diseases.....	Violence.....	Suicide.....	Alcoholism.....	All Other Causes.....	Totals.....
Beaverhead										1		4						2	7
Broadwater			1							1		1							4
Carbon										1	1	1						5	10
Cascade Excl. of										1	2	2						7	21
Great Falls			3				1	1		2		1	2	1		1	1	5	8
Chouteau											1	1	1	1				7	10
Custer			2						1		3	2	1	1	1	1		3	10
Dawson											1							2	7
Deer Lodge Excl. of			4							1	3						1	5	10
Anaconda										3								6	10
Fergus			1	1			1			1		3	1	1		2	1	6	17
Flathead Excl. of										1	1	1	1	1				3	7
Kalispell										2	1							3	5
Gallatin Excl. of											1	1	1	1		2		3	7
Bozeman											1	3				1		1	5
Granite																1		1	1
Jefferson												1	1	3				2	6
Lewis and Clark Excl. of								1		2	2							5	15
Helena										2	2	5	1	1		2		5	15
Lincoln			1							2		2	2	2				2	9
Madison										1		1						1	3
Meagher																2		3	6
Missoula Excl. of																	1	1	3
Missoula City	2		3							4	1	6				2		6	24
Musselshell																3		1	5
Park Excl. of								1		3	1							4	9
Livingston															1			1	2
Powell																		2	5
Ravalli			1									3						1	7
Rosebud																		1	2
Sanders			3								1	1				1		1	7
Silver Bow Excl. of			3					1		2	1	1			9		1	3	21
Butte			12					3		12	3	7	5	1	1		1	18	62
Sweet Grass			1								1							1	3
Teton										2		2				1		4	9
Valley			2								1				1				4
Yellowstone Excl. of			1							1		1						1	4
Billings			1					1				2						7	11
Big Horn																			
Blaine										1	1	1		1					4
Fallon	1																	2	3
Hill			2					1	1	2	1		2			1		2	12
Mineral																			2
Phillips			1									1				2		1	5
Prairie																			
Richland											2	2						1	5
Sheridan			1							1		1						2	5
Stillwater																1		1	2
Toole			1							1								2	4
Wibaux																		1	1
Totals.....	3	44	1				2	10	2	46	23	57	18	2	42	10	4	133	397

Estimated population	420,000
Monthly Death Rate per 1,000 population	.944
Annual Death Rate per 1,000 population	11.32

DIVISION OF FOOD AND DRUGS.

Laboratory Report.

Summary of Samples Analyzed.

	Legal	Illegal	Unofficial	Total
Cream		1		1
Ice Cream.....			5	5
Coloring Compounds.....	3	1		4
Meats:				
Pork Sausage.....	8	12		20
Hamburger	10	22		32
Water				26
Total	21	36	5	88

Twenty six samples of water have been examined in the chemical and bacteriological laboratories: The samples were shipped from the following cities and towns: Armstead, Billings, Big Sandy, Bozeman, Emigrant, Glendive, Hardin, Hobson, Logan, Miles City, Townsend, Warren and Wibaux.

Eleven samples of water analyzed were pronounced satisfactory from the sanitary aspect, and fifteen were pronounced suspicious and recommendations made accordingly.

One sample of cream was analyzed and found to be below standard in fat content.

Four samples of coloring compound were analyzed. Three of these under proper restrictions can be used in foods because they contain permitted dyes, and the other contained a non-permitted dye and is illegal.

Fifty-two samples of meat were examined as classified above in the tabulation. Of the twenty samples of pork sausage examined twelve contained sulphite and the remaining eight complied with the standard. Thirty-two samples of hamburger were examined and twenty-two contained sulphite and the remaining ten were up to standard.

SANITARY DISPOSAL OF EXCRETA

It is the purpose of this article to call the attention of health officers of the state to the importance of educating the public in their respective districts to the necessity of disposing of all sewage in a sanitary manner. Particular attention should be given to the construction of privies and other devices for the disposal of excreta and sewage from residences in the country and in unsewered districts in the towns and cities. To assist health officers in a campaign of education along this line the State Board of Health will issue bulletins and leaflets from time to time. Special Bulletin No. 2, is now ready for distribution. This bulletin is entitled "Sanitary Apparatus for the Disposal of Excreta and Sewage from Private Residences and Isolated Houses" and was written by Professor F. C. Snow, of the Department of Civil Engineering of the Montana State College. Various devices are described and illustrated by working drawings. The estimated cost of the different systems is given.

If the public are to become interested in improved methods of disposing of excreta a few facts should be made very plain to them. In the first place the people should appreciate that cases of typhoid fever in a community mean that excreta from typhoid patients or carriers has found either a direct or indirect route to the mouth of every person who contracts the disease. The purpose of advocating the use of sanitary systems for disposing of excreta is to prevent human excreta from becoming mixed with food and drinking water and to use such precautions that excreta will not find a direct route to the mouth and hands.

A sanitary privy properly maintained will prevent the contamination of the soil, and thus keep the supply of ground water in its natural state of purity so that a well properly protected will deliver safe water. A sanitary privy will be fly--proof and prevent the carrying of infection by flies from excreta direct to food and to the mouths of persons. In short to prevent typhoid fever and other intestinal diseases it is necessary to use sanitary measures to prevent the contamination of food and water by excreta and to use precautions to prevent direct infection from carriers.

Special bulletin No. 2, referred to above gives all information necessary for the construction and maintenance of either

a sanitary privy or water-tight cess pool. Several systems are described so that the method adopted in any given case can be made to suit local conditions. An estimate of the cost of each system is given which is an important factor. People interested should send for Bulletin No. 2.

MEDICAL INSPECTION OF FOOD HANDLERS

New rulings of the Pennsylvania State Department of Health include those with reference to medical certificates for employees of public eating houses; prohibiting the exhibition on the side-walk of vegetables or other articles of food to be eaten uncooked unless they are properly protected from flies and upon a stand elevated two feet above the surface; and additions to the list of reportable diseases.

All cooks, waitresses, chambermaids in hotels, restaurants and other public eating houses will be obliged to have certificates from the local boards of health, setting forth that they are free from contagious or communicable disease.—Am. J. Public Health.

RELATIVE VALUES OF IMPROVEMENTS AFFECTING THE SANITATION OF VILLAGES

The Ohio State Board of Health published a paper by W. H. Dittoe, Chief Engineer of the Board, in the October, 1914, Bulletin which is worthy of attention. It deals with the appropriate expenditure of money in small towns or villages but the facts are certainly applicable to larger municipalities.

Mr. Dittoe writes as follows:

“Each year a vast sum of money is expended for the installation of municipal improvements. Frequently the expenditures are made without serious thought and study to determine the relative benefit to be derived, and as a result it is found that the financial assets of the community have been depleted and the maximum benefit has not been secured. In other words the funds have been misspent.

“The principal improvements made by a municipality particularly the small village, may be classified under three general headings as follows: (1) Improvements for the promotion of public health and sanitation; (2) Improvements

for the promotion of safety and convenience; and (3) Improvements for the promotion of education and social betterment”.

Mr. Dittoe shows that improvements belonging in the second and third divisions have frequently caused the expenditure of sums of money altogether out of proportion to their importance, and left the municipality without funds for much needed water works or sewerage systems.

The local health official is looked upon by Mr. Dittoe as being the one to exert influence to prevent this condition. “He should strongly oppose the extravagant expenditure of public funds for improvements to promote convenience until adequate provision for the promotion of the public health has been made by the installation of a satisfactory public water supply and sewerage system. He should endeavor by conferences with the village officials and citizens to bring about the realization of maximum benefits to the community” Am. J. Pub. Health.

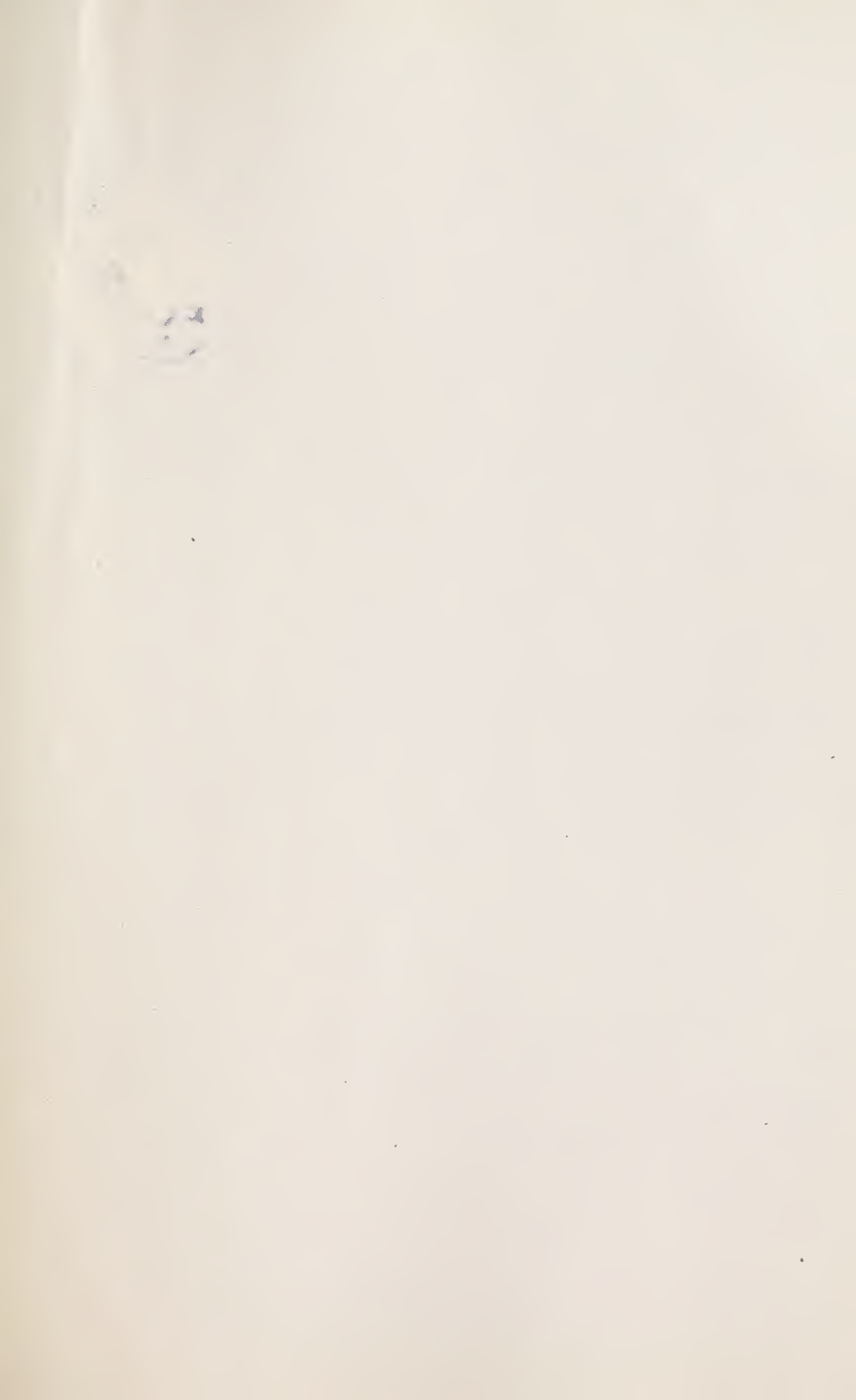
COOPERATION IN PUBLICITY

One of the conspicuous movements in public health work today is that of publicly directed both to education of the public in hygienic principals and to the strengthening of sanitary administration through adequate financial and moral support. Another movement, not less conspicuous, is that of cooperation, of correlation of the various public health agencies in order to secure the resultant strength and economy. And now, at the point where these two movements blend, we find the application of cooperative methods to publicity work.

Not long ago the health officer or civic organization which desired to produce a health exhibition, or even a simple exhibit, found it necessary to collect data, to plan models, charts, or what not, and to go to considerable expense to have these constructed. Then, after all, the results frequently did not come up to expectations. Time and money were spent more or less inefficiently and disappointingly.

But publicity has now become a specialty and the construction of publicity material, from models and charts to lantern slides and printed matter, an art in itself. From a number of specialized sources--public semi-public and private

--excellent exhibition may now be bought, rented or borrowed. It is a fact of very practical importance in the publicity campaign now so generally taken up by progressive health departments, that practically any material which may be needed can be secured at costs adapted even to very limited means by getting in touch with one or more of those sources. The **Journal** will be glad to send a suggestive list of sources from which publicity material can be obtained to any who will write for it. Such material is planned by publicity specialists; the execution is of the best, and the local health officer has but to choose his subjects, send for his material, and place it upon public view. Even to the smallest town, which can at the start afford nothing more, a single piece of effective exhibition material, dealing with a pertinent subject, exposed in a vacant store window, should well repay the small effort and expense of securing it. Am. J. Pub. Health.



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